

STATE OF MAINE
DEPARTMENT OF HEALTH AND HUMAN SERVICES

REQUEST FOR DELETION OF DATA FROM THE ENTERPRISE INFORMATION SYSTEM

| | |
|----------------------------------------------------------------|-------------------------------------|
| Specific data to be deleted: | EIS People/Organization System ID # |
| EIS Component: | |
| Page/Screen: | |
| Data Fields (and/or other explanatory information): | |
| Reason for deletion (detailed explanation is required): | |
| | |

| | |
|---------------------------------------|-----------------------------------------|
| Requested by: | EIS User Name (Print): _____ |
| | |
| _____ EIS User Name (Signature) | _____ Date |
| Recommended by: | Supervisor Name (Print): _____ |
| | |
| _____ Supervisor Name (Signature) | _____ Date |
| Authorized by: | Authorizing Name & Title (Print): _____ |
| | |
| _____ Authorizing Name (Signature) | _____ Date |

| | |
|------------------------------------------|---------------|
| Disposition: | |
| | |
| | |
| | |
| | |
| | |
| _____ EIS Data Security Mgr./Location | _____ Date |

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Guidelines and Process for Requesting the Deletion of Data
from the DHHS Enterprise Information System

A request for deletion of data from the Enterprise Information System (EIS) is not a trivial matter and can be likened to requesting deletion of material from a medical record. Therefore, the circumstances under which data deletion from the EIS will be permitted will be extremely limited and stringently examined. Any requested deletion must be properly and specifically requested, documented, and authorized.

Circumstances under which deletion may be requested:

Deletions of information should be rare and only requested and authorized under specific, limited circumstances. Unlike other changes to data, a deletion means that the data is removed and is as though it never existed. As a result, the authorization of deletions must be rare and carefully considered.

The following are examples of instances in which deletion of data could be requested:

- When information for one person/organization is entered/incorporated into the record of another person/organization and the EIS cannot “cross out” or “black out” that specific, incorrect (and often clearly identifying) information.
- When incorrect information is entered in a record that would be misleading or injurious to the person/organization or misleading for payment/report purposes. For example, a criminal justice history all or a portion of which is incorrect and correcting that incorrect data would still leave the old incorrect information in the record.
- When a person’s record is incorrectly merged with that of another.
- When one person/organization’s note, assessment, reportable event, or plan, etc. is incorrectly attributed to another.

Process for deletion of data:

The process for requesting EIS data deletions is as follows:

1. The deletion request must be made on the proper departmental request form.
2. It must be exact in detailing the precise data to be deleted and in giving the reason(s) for the deletion. The nature of the deletion must follow deletion request guidelines.

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The DHHS EIS data access (CARD) profile grid may be used, when appropriate, to identify the specific data to be deleted. In this instance the EIS system ID for the person from whose record data is to be deleted must also be entered on the profile grid. However, the request form must provide a summary of the information being detailed on the attached access profile grid.

3. The request form must carry the signatures of the EIS user requesting the deletion and of that person's supervisor. Finally, it must carry the proper authorizing signature. The authorizing persons for staff will be the appropriate Team Leader in the Regional Offices, service population Program Director in Central Office, or Medical Records Director in the institutions/facilities – as appropriate to the source of the request for deletion. The Regional Team Leaders will provide reports of deletion requests to the Program Directors.

In those instances where there is no service population association for the source and/or data being deleted, the authorization should be granted by the appropriate Central Office staff person. For example, the Director of Provider Services would be the appropriate authorizing persons for Vendor/Organization data.

4. The signatures must be dated.
5. The properly completed form should then be given to the organizational unit's designated EIS data security manager/administrator who has the authority and capacity to make EIS deletions.
6. The Organizational Unit's EIS Data Security Manager/Administrator making the deletion must complete the following steps:
 - a. Confirm the precise information to be deleted, as well as the identity of the person or organization whose record is being amended. Since the request form -- by design -- carries only the EIS system identification number, this verification is critical to assure the accuracy of the deletion. Data may not be deleted without this verification.
 - b. Identify and assure that the deletion will not have an inappropriate and/or adverse impact on other EIS data prior to deleting any data.
 - c. Document his/her actions on the request form,
 - d. Return a copy of the request form, with the disposition completed, to the person authorizing the deletion (who should, in turn, inform the requester), and
 - e. Maintain the completed request/disposition form in an organized, central, and secure site within the organizational unit (region, central office, institute, or facility).
7. If the Organizational Unit's EIS Data Security Manager/Administrator has any concerns regarding the deletion, which remain unresolved after discussion with the person and supervisor requesting the deletion, the Data Security Manager/Administrator should address these concerns to the appropriate authorizing person (as in #3 above) for direction. These concerns and resolution must be documented and attached to the request/disposition form.